FIII III UIIS IIIIOIIII	lation to identify your	case and this illing.		
Debtor 1	Nicholas	Robert	Vincent	
	First Name	Middle Name	Last Name	
Debtor 2	Mary	Ellen	Robinson	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	Northern	District of	Texas
Case number	24-42011			
	•			

## Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1:	Describe Each Resid	dence, Building, Land, or Other Real Estate	You Own or Have ar	n Interest In
1.	Do y	ou own or have any legal or eq	uitable interest in any residence, building, land, or simi	ar property?	
	☑ No. Go to Part 2.				
	□ Y	es. Where is the property?			
	1.1	Street address, if available, or c	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building	the amount of any secur	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
		description	☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property	Current value of the entire property?	Current value of the portion you own?
		City State ZIP C	Timeshare		your ownership interest nancy by the entireties, or
		County	Debtor 1 only		_
			<ul><li>Debtor 2 only</li><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and another</li></ul>	Check if this is com (see instructions)	munity property
			Other information you wish to add about this ite property identification number:	•	
2.			ou own for all of your entries from Part 1, including any that number here		\$0.00
Pa	art 2:	Describe Your Vehic	les		
			able interest in any vehicles, whether they are registered use a vehicle, also report it on Schedule G: Executory Control		
3.	Ca	rs, vans, trucks, tractors, sport	utility vehicles, motorcycles		
		No			
	₫	Yes			

3.1	Make: Model:	Ford Explorer	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year:	2019	<ul><li>✓ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	50000	☑ Check if this is community property (see instructions)	\$17,381.70	\$17,381.70
	Other information:		,		
	Source of Value: N	IADA			
If you	own or have more than	one, describe	here:		
3.2	Make:	Ford	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Fusion	Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair	
	Year:	2016	<ul><li>✓ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	96000	☑ Check if this is community property (see	\$8,910.00	\$8,910.00
	Other information:		instructions)		
	Source of Value: N	IADA			
3.3	Make:	Indian	Who has an interest in the property? Check one.	Do not deduct secured cla	•
	Model:	Carbon R	<ul><li>□ Debtor 1 only</li><li>□ Debtor 2 only</li><li>☑ Debtor 1 and Debtor 2 only</li></ul>	the amount of any secure Creditors Who Have Clair	
	Year:	2022	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	4000	☑ Check if this is community property (see instructions)	\$10,000.00	\$10,000.00
	Other information:				
<i>Exam</i> <b>√</b> 1 N	nples: Boats, trailers, mo	•	nd other recreational vehicles, other vehicles, and watercraft, fishing vessels, snowmobiles, motorcycle a		
4.1	Make:		Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla	d claims on Schedule D:
	Model:		<ul><li>Debtor 2 only</li><li>Debtor 1 and Debtor 2 only</li></ul>	Creditors Who Have Clair	
	Year:		☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:		☐ Check if this is community property (see instructions)		
			vn for all of your entries from Part 2, including any umber here		\$36,291.70

Case number (if known) 24-42011

Pa	rt 3: Describe You	ur Personal and Household Items	
Do y	ou own or have any legal o	r equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furn	nishings	
	Examples: Major appliance	es, furniture, linens, china, kitchenware	
	☐ No		
	✓ Yes. Describe	See Attached.	\$485.00
		See Attached.	Ψ-03.00
7.	Electronics		
		radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music etronic devices including cell phones, cameras, media players, games	
	☐ No		
	Yes. Describe	Televisions	
		Computers	\$400.00
		Cell Phones	
8.	Collectibles of value		
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles	
	<b>√</b> No		
	Yes. Describe		
9.	Equipment for sports and	hobbies	
		aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments	
	<b>√</b> No		
	Yes. Describe		
10.	Firearms		
	Examples: Pistols, rifles, sl	notguns, ammunition, and related equipment	
	<b>₫</b> No		
	Yes. Describe		
11.	Clothes		
	Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories	
	☐ No		
	Yes. Describe	Clothes Shoes	\$220.00

12.	Jewelry  Examples: Everyday jewel silver	y, costume jewelry, engagement rings	, wedding rings, heirloom jewelry, watches, gems, gold,	
	□ No			
	Yes. Describe	Rings		\$3,000.00
13.	Non-farm animals  Examples: Dogs, cats, bird	s, horses		
	☐ No			
	✓ Yes. Describe	1 Dog 2 Cats		\$100.00
14.	Any other personal and he	usehold items you did not already	list, including any health aids you did not list	
	<b>☑</b> No			
	Yes. Give specific information			
15.		-	g any entries for pages you have attached	\$4,205.00
Pa	rt 4: Describe You	r Financial Assets		
Do y	ou own or have any legal o	equitable interest in any of the following	owing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash			
	Cuanantas, Managura, bay	in your wallet, in your home, in a safe	e deposit box, and on hand when you file your petition	
	<b>√</b> No	•		
	<b>√</b> No		Cash:	
17.	<b>√</b> No	•	Cash:	
17.	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir	gs, or other financial accounts; certific	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.	
17.	✓ No  ☐ Yes  Deposits of money  Examples: Checking, saving and other similar  ☐ No	gs, or other financial accounts; certific rinstitutions. If you have multiple acco	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.	
17.	✓ No  ☐ Yes  Deposits of money  Examples: Checking, saving and other similar	gs, or other financial accounts; certific r institutions. If you have multiple acco	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:	
17.	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir and other simils  ☐ No  ✓ Yes	gs, or other financial accounts; certific r institutions. If you have multiple acco Institutio JPMor	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.	\$36.00
17.	✓ No  ☐ Yes  Deposits of money  Examples: Checking, saving and other similar  ☐ No  ✓ Yes	gs, or other financial accounts; certific r institutions. If you have multiple acco Institutio JPMor 1. Checking account:	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00
	✓ No  ☐ Yes  Deposits of money  Examples: Checking, saving and other similar  ☐ No  ✓ Yes	gs, or other financial accounts; certifice r institutions. If you have multiple accounts institutions. If you have multiple accounts accounts.	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00
	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir and other simila  ☐ No  ✓ Yes  17  Bonds, mutual funds, or particular texamples: Bond funds, investigations.	gs, or other financial accounts; certific rinstitutions. If you have multiple accounts and the state of the s	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00
	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir and other simila  ☐ No  ✓ Yes  17  Bonds, mutual funds, or part of the samples: Bond funds, invo	gs, or other financial accounts; certific rinstitutions. If you have multiple accounts and the state of the s	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00
	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir and other simila  ☐ No  ✓ Yes  17  Bonds, mutual funds, or part of the samples: Bond funds, invo	gs, or other financial accounts; certific rinstitutions. If you have multiple accounts and the state of the s	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00
	✓ No  ☐ Yes  Deposits of money  Examples: Checking, savir and other simila  ☐ No  ✓ Yes  17  Bonds, mutual funds, or part of the samples: Bond funds, invo	gs, or other financial accounts; certific rinstitutions. If you have multiple accounts and the state of the s	ates of deposit; shares in credit unions, brokerage houses, bunts with the same institution, list each.  n name:  gan Chase Bank nt Number: XXXXX3080	\$36.00

Debtor	Vincent, Nicholas F	Robert; Robinson, Ma	ry Ellen	Case nu	mber (if known) 24-4201	1
19.	Non-publicly traded s LLC, partnership, and		corporated and unincorporated	l businesses, inclu	ıding an interest in an	
	<b>√</b> No					
	Yes. Give specific information about them	Name of entity:			% of ownership:	
20.	Negotiable instruments	include personal checks,	negotiable and non-negotiable cashiers' checks, promissory not of transfer to someone by signing	tes, and money orde		
	<b>☑</b> No					
	Yes. Give specific information about	Issuer name:				
	them	issuel fiame.				
21.	Retirement or pension	2 2000 Units				
۷۱.	•		(k), 403(b), thrift savings account	ts. or other pension	or profit-sharing plans	
	□ No	, , 3.9,	V, V	,	, , , , , , , , , , , , , , , , , , , ,	
	Yes. List each account separately.	Type of account:	Institution name:			

\$1,300.00

Lockheed martin

Pension plan:

22.	Security deposits and	prepayments			
	Your share of all unused deposits you have made so that you may continue service or use from a company				
	Examples: Agreement others				
	<b>√</b> No				
	☐ Yes		Institution name or individual:		
		Electric:			
		Gas:			
		Heating oil:			
		Security deposit on	rental unit:		
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.	Annuities (A contract f	or a periodic payment	of money to you, either for life or for a number of years)		
20.	✓ No	or a periodic payment	of money to you, entrer for the or for a number of years)		
	Yes	Issuer name and de	scription:		
	_		·		
24.	Interests in an educat 26 U.S.C. §§ 530(b)(1),		Int in a qualified ABLE program, or under a qualified state tuition program.		
	✓ No	(b), and 020(b)	(1).		
	_	Institution name and	I description. Separately file the records of any interests.11 U.S.C. § 521(c):		
25.	Trusts, equitable or fu	iture interests in pro	perty (other than anything listed in line 1), and rights or powers exercisable		
	✓ No				
	Yes. Give specific				
	information about th	nem			

26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements		
	☑ No		
	Yes. Give specific information about them		
27.	Licenses, franchises, and other general intangibles		
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, pro	ofessional licenses	
	☑ No		
	Yes. Give specific information about them		
Mone	ey or property owed to you?		Current value of the
			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	<b>☑</b> No		
	Yes. Give specific information about them, including whether you	Federal:	
	already filed the returns and the tax years	State:	
	ille tax years	Local:	
		Local.	
29.	Family support		
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce sett settlement	lement, property	
	☑ No		
	Yes. Give specific information	Alimony:	
		Maintenance:	
		Support:	
		Divorce settlement:	
		Property settlement:	
30.	Other amounts someone owes you		
00.	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay,	vorkers' compensation,	
	<b>☑</b> No		
	Yes. Give specific information		

31.	Interests in insurance policies			
	Examples: Health, disability, or life insurance	ce; health savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	☐ No			
	✓ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		Term Life Insurance through employer	Children	\$0.00
32.	Any interest in property that is due you for	rom someone who has died		
	If you are the beneficiary of a living trust, exproperty because someone has died.	pect proceeds from a life insurance policy	y, or are currently entitled to receive	
	<b>☑</b> No			
	Yes. Give specific information			]
33.	Claims against third parties, whether or r	not you have filed a lawcuit or made a	domand for navmont	_
55.	Examples: Accidents, employment disputes	•	demand for payment	
	<b>☑</b> No	,		
	Yes. Describe each claim			1
34.	Other contingent and unliquidated claims claims	s of every nature, including countercla	ims of the debtor and rights to set of	f
	<b>☑</b> No			
	☐ Yes. Describe each claim			
35.	Any financial assets you did not already	list		
	<b>√</b> No			
	Yes. Give specific information			7
	_			_
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$1,336.00
	Tot I art 4. Write that humber here			
Par	t 5: Describe Any Business-F	Related Property You Own or F	Have an Interest In Tist any	real estate in Part 1
	Do you own or have any legal or equitable	· · ·	-	
37.		e interest in any business-related prop	Jerty ?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you	u already earned		
	<b>☑</b> No			
	☐ Yes. Describe			7

Case number (if known) 24	<b>I-420</b>	11	
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39.	Office equipment, furnishings	, and supplies			
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs,				
	electronic devices				
	√ No				
	Yes. Describe				
	<u> </u>				
40.		t, supplies you use in business, and tools of your trade			
	√ No				
	Yes. Describe				
41.	Inventory				
	<b>√</b> No				
	Yes. Describe				
42.	Interests in partnerships or jo	int ventures			
	<b>₫</b> No				
	Yes. Describe				
	Name o	of entity:	% of ownership:		
43.	Customer lists, mailing lists,	or other compilations			
	<b>☑</b> No				
		personally identifiable information (as defined in 11 U.S.C. § 101(4	11A)) <b>?</b>		
	□ No	,	,,		
	Yes. Describe				
	_				
44.	Any business-related property	you did not already list			
	<b>₫</b> No				
	Yes. Give specific information				
	momation				
				-	
				<u> </u>	

45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	☐ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	
	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes	
48.	Crops—either growing or harvested	
	<b>☑</b> No	
	Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	☑ No	
	☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	<b>☑</b> No	
	☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	<b>☑</b> No	
	Yes. Give specific	
	information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	

	<b>☑</b> No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	<b>→</b>	\$0.00	
Pa	rt 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		<b>→</b>	\$0.00
56.	Part 2: Total vehicles, line 5	\$36,291.70		
57.	Part 3: Total personal and household items, line 15	\$4,205.00		
58.	Part 4: Total financial assets, line 36	\$1,336.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$41,832.70	Copy personal property total	+ \$41,832.70
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$41,832.70

Case number (if known) 24-42011

	Continuation Page	
6.	Household goods and furnishings	
	Dining Room Furniture	\$25.00
	Dryer	\$50.00
	Living Room Furniture	\$100.00
	Microwave	\$10.00
	Refrigerator/Freezer	\$50.00
	Stove	\$200.00
	Washing Machine	\$50.00

Fill in this inform	nation to identify your					
Debtor 1	Nicholas	Robert	Vincent			
	First Name	Middle Name	Last Name			
Debtor 2 Mary Ellen Rob		Robinson				
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for t	the: North	<b>ern</b> Dis	strict of	Texas	
Case number	24-42011					
(if known)						Check if this amended fill

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ic	lentify the Property You	Claim as Exempt						
1.	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
	line on Schedule A/B that lists this property		Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Line from Schedule A/E	2022 Indian Carbon R 3.1	\$10,000.00	<b>⊴</b>	\$0.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)			
	Brief description: Line from Schedule A/E	2016 Ford Fusion 3.2	\$8,910.00	<b>1</b>	\$0.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)			
3.	any applicable statutory limit								

Debtor 1

Nicholas Robert Vincent Case number (if known) 24-42011

Debtor 2

Mary	Ellen	Robinson	
First Name	Middle Name	Last Name	

	on of the property and ule A/B that lists this	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
property		Copy the value from Schedule A/B	Ch	eck only one box for each exemption.	
Brief description:	Stove	\$200.00	<b>⊴</b>	\$200.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Refrigerator/Freezer	\$50.00	<b>J</b>	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Washing Machine	\$50.00	<b>4</b>	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Dryer	\$50.00	<b>1</b>	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Living Room Furniture	\$100.00	<b>1</b>		
Line from Schedule A/B:	6		☐ Ā1	\$100.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description:	Microwave	\$10.00	<b>√</b>	\$10.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	(-//-/
Brief description:	Dining Room Furniture	\$25.00			
Line from	6		<b>1</b>	\$25.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1

Nicholas Robert Vincent Case number (if known) 24-42011

Debtor 2

Mary	Ellen	Robinson	
First Name	Middle Name	Last Name	•

	on of the property and ule A/B that lists this	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
Brief description:	Televisions Computers Cell Phones	\$400.00	Ò	\$400.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	6.6.6. 3 622(4)(6)
Brief description:	Clothes Shoes	\$220.00	<b>⊴</b>	\$220.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Rings	\$3,000.00	<b>√</b>	\$3,000.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	_
Brief description:	1 Dog 2 Cats	\$100.00	<b>√</b>	\$100.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	13			100% of fair market value, up to any applicable statutory limit	_
Brief description:	JPMorgan Chase Bank Checking account	\$36.00			
Line from Schedule A/B:	17		<b>⊴</b>	\$36.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description:	Lockheed martin	\$1,300.00	<b>4</b>	\$1,300.00	11 U.S.C. § 522(d)(12)
Line from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	3-3-(-)/(-)
Brief description:	Term Life Insurance through	\$0.00			
	employer		<b>√</b>	\$0.00	11 U.S.C. § 522(d)(7)
Line from Schedule A/B:	31			100% of fair market value, up to any applicable statutory limit	

Fill in this infor	mation to identify you	r case:						
Debtor 1	Nicholas	Robei	rt	Vincent				
	First Name	Middle		Last Name				
Debtor 2	Mary	Ellen		Robinson				
(Spouse, if filing		Middle	Name	Last Name				
			Morthor	n District	of Toyon			
United States	Bankruptcy Court for	the:	Norther	n District	of <u>Texas</u>			
	(if <b>24-42011</b>				_		☐ Check if	this is an
known)							amende	
Official For	-m 106D							Ū
Official For								
Schedu	ıle D: Cre	ditors	s Who	Have Cla	aims Sec	cured by F	Property	12/15
Be as complete	and accurate as po	ssible. If tw	o married p	eople are filing tog	ether, both are eq	ually responsible for	supplying correct inf	ormation. If
more space is i	needed, copy the Ad						o of any additional pag	
	number (if known).							
_	editors have claims	•		•				
,			to the court v	vith your other sched	dules. You have not	hing else to report on	this form.	
<b>⊻</b> Yes. Fil	I in all of the informati	on below.						
Part 1:	List All Secured	Claims						
2. List all se	ecured claims. If a cr	editor has m	ore than one	secured claim, list t	he creditor	Column A	Column B	Column C
	for each claim. If mo			,		Amount of claim	Value of collateral	Unsecured
		possible, lis	t the claims in alphabetical order according to the			Do not deduct the	that supports this	portion
creditor's r	name.					value of collateral.	claim	If any
2.1 Consu	mer Portfolio Serv	rices,	Describe th	ne property that see	cures the claim:	\$10,369.00	\$8,910.00	\$1,459.00
Inc.								
Creditor's	Name		2016 For	d Fusion				
PO Box	c 98774		A o of the d	ata yayı fila tha ala	im in Chapk all the	at apply		
Number	Street			ate you file, the cla	iim is: Check all tha	ат арріу.		
			☐ Conting☐ Unliquid					
Phoeni	x, AZ 85038-0774		☐ Dispute					
City	State	ZIP Code	■ Dispute	u				
Who owe	es the debt? Check	one.	Nature of li	en. Check all that a	pply.			
☐ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan)								
☐ Debto	•			y lien (such as tax lie		,		
	or 1 and Debtor 2 only	y		nt lien from a lawsui				
At lea	ast one of the debtors ner	and	Other (in offset)	ncluding a right to	Certificate of	of Title		
	k if this claim relate	s to a						

Date debt was incurred

4/1/2024

Add the dollar value of your entries in Column A on this page. Write that number here:

3 5 2 6

\$10,369.00

Last 4 digits of account number

Debtor 2 Robinson Mary Ellen First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the claim followed by 2.4, and so forth. value of collateral. If any Performance Finance Describe the property that secures the claim: \$10,543.00 \$10,000.00 \$543.00 Creditor's Name 2022 Indian Carbon R Attn: Bankruptcy Attn: **Bankruptcy** As of the date you file, the claim is: Check all that apply. 1515 West 22nd Street, Suite Contingent 100W Unliquidated Number Street Disputed Oak Brook, IL 60523 ZIP Code City State Nature of lien. Check all that apply. Who owes the debt? Check one. ☐ Debtor 1 only ☑ An agreement you made (such as mortgage or secured car loan) ☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☑ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit ☑ Other (including a right to ■ At least one of the debtors and **Certificate of Title** another offset) ☐ Check if this claim relates to a community debt Date debt was incurred 3/1/2022 Last 4 digits of account number 0 9 8 Add the dollar value of your entries in Column A on this page. Write that number here: \$10,543.00

Case number (if known) 24-42011

Write that number here:

Debtor 1

**Nicholas** 

Robert

If this is the last page of your form, add the dollar value totals from all pages.

Vincent

Case number (if known) 24-42011 Debtor 2 Ellen Robinson Mary First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the claim followed by 2.4, and so forth. value of collateral. If any **Together Credit Union** Describe the property that secures the claim: \$30,103.00 \$17,381.70 \$12,721.30 Creditor's Name 2019 Ford Explorer 423 Lynch St Number Street As of the date you file, the claim is: Check all that apply. Contingent Saint Louis, MO 63118 Unliquidated Disputed ZIP Code City State Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ Debtor 1 only An agreement you made (such as mortgage or secured car loan) ☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit ☐ At least one of the debtors and ✓ Other (including a right to) **Certificate of Title** another offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number 0 0 0 1 Date debt was incurred 5/1/2019 Add the dollar value of your entries in Column A on this page. Write that number here: \$30,103.00 If this is the last page of your form, add the dollar value totals from all pages. \$51,015.00

Debtor 1

**Nicholas** 

Write that number here:

Robert

Vincent

Filli	in this inform	nation to identify your ca	ase:								
De	ebtor 1	Nicholas	Robert		Vince	ent					
		First Name	Middle Na	ıme	Last Na						
De	ebtor 2	Mary	Ellen		Robii	neon					
	oouse, if filing)		Middle Na	ıme	Last Na						
							Towas				
Un	ited States E	Bankruptcy Court for the	e:	Northern		District of	Texas				
	se number	24-42011								D Observation	Abla ta an
(if I	known)									amende	this is an d filing
∩ffi	icial Forr	m 106E/F									· ·
Sc	chedu	le E/F: Cre	editor	s Who	H	ave Ur	nsecure	ed Cla	ims		12/15
othe Form clain	r party to ar n 106A/B) ar ns that are l	and accurate as poss by executory contract and on Schedule G: Ex isted in Schedule D: (	s or unexpi ecutory Co Creditors W	ired leases Intracts and Iho Have Cl	that cou I Unexp Iaims So	uld result in hired Leases ecured by Pr	a claim. Also lis (Official Form 1 roperty. If more	st executory 106G). Do no space is nee	contracts on So t include any cre eded, copy the F	hedule A/B: Preditors with partart you need, f	operty (Officia rtially secured ill it out,
	ber the entr ber (if know	ies in the boxes on th 'n).	ie left. Attac	cn the Cont	inuatioi	n Page to thi	s page. On the	top of any a	aditional pages,	write your nan	ne and case
Р	art 1:	ist All of Your PRI	ORITY Un	secured C	Claims						
1.	Do any cre	editors have priority u	insecured o	laims agair	nst vou	?					
•	□ No. Go ☑ Yes.	•	inscource c	namio agaii	ist you						
2.	claim listed amounts. A	your priority unsecure , identify what type of c s much as possible, lis Continuation Page of Pa	claim it is. If	a claim has in alphabeti	both pric	ority and nonper according to	priority amounts, the creditor's n	, list that clain ame. If you h	n here and show ave more than tw	both priority and	nonpriority
	(For an exp	planation of each type o	of claim, see	the instruct	ions for	this form in th	ne instruction bo	oklet.)			
									Total claim	Priority amount	Nonpriority amount
2.1	Lee Law	Firm, PLLC		Last 4 digi	ts of ac	count numb	er		\$2,025.00	\$2,025.00	\$0.00
	_	editor's Name		_					<del></del>	<del></del>	
	8701 Be	dford Euless Rd 51	0	When was	the det	bt incurred?	-				
	Number	Street									
				As of the o	late you	u file, the cla	im is: Check all	that apply.			
	Hurst, T	X 76053		☐ Conting	jent						
	City		IP Code	Unliquid	dated						
	•			☐ Dispute	ed						
	_	rred the debt? Check	one.	Type of PR	IORITY	unsecured	claim:				
	<ul><li>☐ Debtor</li><li>☐ Debtor</li></ul>	•				ort obligations					
	_	1 and Debtor 2 only				Ū	ts you owe the g	overnment			
		st one of the debtors an	nd another				l injury while you		ated		
	☑ Check	if this claim is for a	iu ai iuli lei			Attorney F			•		
	comm	unity debt									

✓ No ☐ Yes

Is the claim subject to offset?

Debtor 1	Nicholas Robert Vin		Vincent	Case number (if known) 24-42011								
Debtor 2	Mary	Ellen	Robinson									
	First Name	Middle Name	Last Name	<del></del>								
Part 2:	List All of You	ur NONPRIORITY Un	secured Claims									
3. Do any	y creditors have no	npriority unsecured cla	aims against you?									
	•	o report in this part. Sub	mit this form to the court with	your other schedules.								
<b>✓</b> Yes	S											
nonprio	ority unsecured clain	n, list the creditor separa	tely for each claim. For each	the creditor who holds each claim. If a creditor has more than one claim listed, identify what type of claim it is. Do not list claims already ar creditors in Part 3.If you have more than three nonpriority unsecured								
claims	fill out the Continuat	ion Page of Part 2.										
				Total claim								
4.1 Ally	Bank		Last 4 digits of a	account number \$337.00								
Nonpri	iority Creditor's Nam	е	When was the d	oht incurred?								
C/O /	AIS Portfolio Ser	vices, LLC	which was the u									
4515	N Santa Fe Ave	APS	As of the date v	au file the claim in Check all that apply								
Numbe	er Street		_	ou file, the claim is: Check all that apply.								
Okla	homa City, OK 7	3118	☐ Contingent☐ Unliquidated☐									
City	•			☐ Disputed								
Who i	incurred the debt?	Check one	·									
_	ebtor 1 only	Official offici	<u>-</u> .	ORITY unsecured claim:								
_	ebtor 2 only		☐ Student loans									
	ebtor 1 and Debtor 2	only	U Obligations a priority claims	rising out of a separation agreement or divorce that you did not report as								
☐ At	least one of the deb	otors and another		☐ Debts to pension or profit-sharing plans, and other similar debts								
☑ Ch	heck if this claim is	for a community debt	✓ Other. Specif	☑ Other. Specify Credit Card								
Is the	claim subject to of	ffset?										
<b>√</b> No	•											
☐ Ye												
4.2			Last 4 digits of a	cocount number #0.00								
<u>CAC</u>	H, LLC fority Creditor's Nam	Δ		account number \$0.00								
	30x 10587	C	When was the d	ebt incurred? 2024								
Numbe												
T T G T T G	o. Gudet		As of the date y	ou file, the claim is: Check all that apply.								
			☐ Contingent									
	enville, SC 29603	toto 71	P Code Unliquidated									
City	3	tate ZI	☐ Disputed									
	Who incurred the debt? Check one.  Debtor 1 only		Type of NONPR	ORITY unsecured claim:								
			☐ Student loans									
Debtor 2 only			rising out of a separation agreement or divorce that you did not report as									
	☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		_ priority claims									
		for a community debt		Debts to pension or profit-sharing plans, and other similar debts								
		•		Collecting for Care Credit								
	claim subject to of	ffset?										
<b>☑</b> No												
☐ Ye	es											

Debtor 1	Nicholas	Nicholas Robert Vi		ncent	Case nu	Case number (if known) 24-42011					
Debtor 2	2 Mary	Ellen	Ro	binson							
	First Name	Middle Name	Last	Name							
Part	2: Your NONPR	IORITY Unsecured C	laims –	Continuation P	age						
After li	isting any entries on th	is page, number them b	peginning	g with 4.4, followe	d by 4.5, and so fo	orth.				Total cla	iim
4.3	Capital One			Last 4 digits of a	account number	3	9	2	0	\$1,648	3.00
N	Ionpriority Creditor's Nam	ne		Mhan waa tha d	aht in arrona dO		404	<b>'004</b>	_		
<u> </u>	PO Box 70886			When was the d	ept incurred?		12/1	/201	<del>/</del>		
N	lumber Street										
_				As of the date you file, the claim is: Check all that apply.							
7	Charlotte, NC 28272		☐ Contingent								
_	City State ZIP Code			Unliquidated							
	Yho incurred the debt?	Charlena		Disputed							
	_	Check one.		Type of NONPRIORITY unsecured claim:							
	Debtor 1 only Debtor 2 only		<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not report as</li></ul>								
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2	2 only								S	
	At least one of the del	•		priority claims	3						
		s for a community debt		☐ Debts to pens ☐ Other. Specify	sion or profit-sharin y <b>CreditCard</b>	ig plan	s, an	d oth	∍r similar	debts	
Is	s the claim subject to o	ffset?			·					•	
5	<b>∕</b> No										
	Yes										
4.4	Capital One			Last 4 digits of a	account number	5	5	4	6	_\$1,079	€.00
N	Ionpriority Creditor's Nam	ne		1811 41 1	14.						
l	PO Box 70886			When was the d	ebt incurred?		3/1/	2019	<del>)</del>		
N	lumber Street										
_			As of the date ye	ou file, the claim i	s: Che	eck al	l that	apply.			
7	Charlotte, NC 28272			Contingent							
_	· · · · · · · · · · · · · · · · · · ·	State ZII	P Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>							
v	Vho incurred the debt?	Check one.		- Disputed							
	Debtor 1 only			Type of NONPRI	ORITY unsecured	l clain	1:				

✓ No ☐ Yes

☐ Debtor 2 only

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and anotherCheck if this claim is for a community debt

☐ Student loans

☑ Other. Specify CreditCard

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	
	_			

Pa	104 Tour NUMPRIORITY Unsecured Claims —	- Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.  Total claim					
4.5	Capital One	Last 4 digits of account number 1 9 7 4 \$1,046.00	D				
	Nonpriority Creditor's Name	<u> </u>					
	PO Box 70886	When was the debt incurred? 12/1/2017					
	Number Street	•					
		As of the date you file, the claim is: Check all that apply.					
	Charlotte, NC 28272	Contingent					
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed					
	Who incurred the debt? Check one.	Бюриси					
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	☐ Debtor 2 only	☐ Student loans					
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as					
	At least one of the debtors and another	priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard					
	Is the claim subject to offset?	<u> </u>					
	☑ No						
	☐ Yes						
4.6	Capital One	Last 4 digits of account number \$1,022.00					
	Nonpriority Creditor's Name	When was the debt incurred? 2024	_				
	1680 Capital One Dr.	when was the debt incurred? Z0Z4					
	Number Street	•					
		As of the date you file, the claim is: Check all that apply.					
	Mc Lean, VA 22102	Contingent					
	City State ZIP Code	- Unliquidated					
	Who incurred the debt? Check one.	☐ Disputed					
	Debtor 1 only	Type of NONPRIORITY unsecured claim:					
	Debtor 2 only	☐ Student loans					
	✓ Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
	☐ At least one of the debtors and another	priority claims  Debts to pension or profit-sharing plans, and other similar debts					
	☑ Check if this claim is for a community debt	✓ Other. Specify Credit Card					
	Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·					
	<b>☑</b> No						
	☐ Yes						

ebtor 1	Nicholas	Robert	Vin	cent	Case nu	mber (if known) 24-42011		
ebtor 2	Mary	Ellen	Rok	oinson	<u></u>	, ,		
	First Name	Middle Name	Last	Name				
Part 2:	YNONDRIA	ODITY II		0 41 D				
		ORITY Unsecured C						
	g any entries on this	s page, number them b	peginning	with 4.4, followed	d by 4.5, and so fo	orth.	Total claim	
4.7 <u>Capi</u>	tal One Bank (US	SA), N.A.		Last 4 digits of a	account number	1 5 6 7	\$2,539.00	
Nonpr	iority Creditor's Name	9		When was the de	ebt incurred?	1/1/2017		
by A	merican InfoSou	rce as agent		TTTOTT WAS END OF	obt mounour	1/1/2017		
PO E	3ox 71083							
Numb	er Street			_	ou file, the claim i	s: Check all that apply.		
Char	lotte, NC 73118			☐ Contingent				
City	St	ate ZII	P Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>				
Who i	ncurred the debt?	Check one.		_ Dioputod				
☐ De	ebtor 1 only				ORITY unsecured	I claim:		
_ De	ebtor 2 only			☐ Student loans				
	ebtor 1 and Debtor 2	only		Obligations as priority claims	•	ration agreement or divorce that	you did not report as	
☐ At	At least one of the debtors and another					g plans, and other similar debts		
☐ CI	☐ Check if this claim is for a community debt				CreditCard	3,,		
Is the	claim subject to of	fset?						
<b>√</b> No	-							
☐ Ye								
4.8 Cani	tal One Bank (US	SA). N.A.		Last 4 digits of a	account number	1 3 6 9	\$1,734.00	
_	iority Creditor's Name					<del>. • • •</del>	Ψ.,.σσσ	
•	merican InfoSou			When was the debt incurred? 11/1/2021				
		oo uo ugo						
Numb	Box 71083 er Street			As of the date yo	ou file, the claim i	s: Check all that apply.		
				Contingent				
	lotte, NC 73118	ate ZII	P Code	Unliquidated				
City			P Code	Disputed				
Who i	ncurred the debt?	Check one.		Type of NONPRI	ORITY unsecured	I claim:		
	ebtor 1 only			☐ Student loans				
	ebtor 2 only					ration agreement or divorce that	vou did not report as	
	ebtor 1 and Debtor 2	•		priority claims	3	-	,	
	least one of the deb				•	g plans, and other similar debts		
	ieck ii uiis ciaim is	for a community debt		✓ Other. Specify	/ CreditCard			

Is the claim subject to offset?

✓ No ☐ Yes

Debtor 1	Nicholas	Robert	Vincent	Case numb	per (if known) 24-42011				
Debtor 2	Mary	Ellen	Robinson						
	First Name	Middle Name	Last Name						
Part 2:	Your NONDRIG	ORITY Unsecured C	aims — Continuati	on Page					
				llowed by 4.5, and so fort	h	Total claim			
4.0	ital One Bank (US			ts of account number	3 6 7 4	\$1,335.00			
<u> </u>	riority Creditor's Name			-	3 0 7 4	φ1,333.00			
•	merican InfoSou		When was	the debt incurred?	4/8/2019				
	Box 71083	. co uo ugo							
Numb			As of the d	late you file, the claim is:	Check all that apply.				
	rlotte, NC 73118		Conting						
City	•	tate ZIF	Code Unliquid						
Who	incurred the debt?	Check one	☐ Dispute	a					
_	ebtor 1 only	Official offic.	Type of NC	NPRIORITY unsecured c	laim:				
_	ebtor 2 only		Student						
	☑ Debtor 2 only ☑ Debtor 1 and Debtor 2 only				tion agreement or divorce that	you did not report as			
	t least one of the deb	•		priority claims  Debts to pension or profit-sharing plans, and other similar debts					
		for a community debt		✓ Other. Specify <b>CreditCard</b>					
le the	claim subject to of	feat?		<u>Orcanouru</u>					
☑ N	•	1361:							
<u> </u>									
4.10 Can	ital One Bank (US	SΔ) N Δ	l ast 4 digi	ts of account number		\$1,052.00			
	riority Creditor's Name	•		e or account number	<del></del>	Ψ1,032.00			
	American InfoSou		When was	the debt incurred?	2024				
		ice as agent							
	Box 71083		——— As of the d	late you file, the claim is:	Check all that apply.				
Numb			☐ Conting	ent					
	rlotte, NC 73118		Unliquid	dated					
City	St	tate ZIF	Code Dispute	d					
Who	incurred the debt?	Check one.	Type of NC	NPRIORITY unsecured c	laim:				
☐ De	ebtor 1 only		□ Student		iaiii.				
	ebtor 2 only				tion agreement or divorce that	t you did not report as			
	ebtor 1 and Debtor 2		priority		non agreement of divolce that	you did flot report as			
	t least one of the deb		Debts to	o pension or profit-sharing p	olans, and other similar debts				
<b>☑</b> C	heck if this claim is	for a community debt	✓ Other. S	Specify Credit Card					

Is the claim subject to offset?

✓ No ☐ Yes

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	· · · · · · · · · · · · · · · · · · ·
	First Name	Middle Name	Last Name	

	sting any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth.	Total claim
4.11	Care Credit	Last 4 digits of account number	\$0.00
	lonpriority Creditor's Name	When was the debt incurred? 2024	
C W U U U	Drlando, FL 32896  Sity State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  the claim subject to offset?	As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce priority claims ☐ Debts to pension or profit-sharing plans, and other similar of other. Specify Medical Bill	
_			
	Yes		
4.12 (		Last 4 digits of account number  When was the debt incurred? 2024	\$1,200.00
4.12 (N) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A	Yes  Cashnet USA  Ionpriority Creditor's Name		\$1,200.00

✓ No ☐ Yes

ebtor	1	Nicholas Robert		Vir	ncent	Case numbe	er (if known) 24-42011			
ebtor	2	Mary	Ellen	Ro	binson					
		First Name	Middle Name	Last	Name	_				
Par	t 2:	Your NONPRI	ORITY Unsecured C	laims –	Continuation Page					
After	listing a	any entries on thi	s page, number them b	eginnin	g with 4.4, followed by 4	1.5, and so forth	ı <b>.</b>	Total claim		
4.13	Cashn	et USA			Last 4 digits of accou	int number		\$1,000.00		
Ī	Nonprior	rity Creditor's Name	е		When was the debt in	ourred?	2024			
_	ATTN: Compliance				when was the dept in		2024			
	175 W	Jackson Blvd	Ste 1000							
-	Number				_	As of the date you file, the claim is: Check all that apply.				
	Chicag	go, IL 60604-286	63		<ul><li>Contingent</li><li>Unliquidated</li></ul>					
(	City	St	ate ZIF	Code	☐ Disputed					
 	Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ☑ Check if this claim is for a community debt  Is the claim subject to offset?			Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report a priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Signature loan						
	✓ No ☐ Yes									
4.14	Cerule	an Credit Card			Last 4 digits of accou	int number _		\$750.00		
Ī	Nonprior	rity Creditor's Name	е		When was the debt in	curred?	2024			
	РО Во	x 3220			· · · · · · · · · · · · · · · · · · ·	_	LULT			
ı	Number	Street			As of the date you file	the eleim is: (	Shook all that apply			
-	Buffalo	o, NY 14240			☐ Contingent☐ Unliquidated	s, the Claim IS: (	энвок ан шасарру.			
(	City	St	ate ZIF	<sup>2</sup> Code	☐ Disputed					
,	Who inc	curred the debt?	Check one.		_ 2.050.00					

Type of NONPRIORITY unsecured claim:

☑ Other. Specify Credit Card

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

☐ Debtor 1 only

Debtor 2 only

✓ No ☐ Yes

**☑** Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

ebtor 1	Nicholas	Robert	Vincent	Case nu	mber	(if know	<sub>(n)</sub> 24-4	12011	
ebtor 2	Mary	Ellen	Robinson						
	First Name	Middle Name	Last Name						
Part 2:	Your NONPRI	ORITY Unsecured Cla	ims — Continuation Pag	ie					
			ginning with 4.4, followed		orth.				Total claim
4.45	se Card Services	-		Last 4 digits of account number 5 5 2 3					
	iority Creditor's Name	e				· —		_	\$7,399.00
PO E	3ox 15548		When was the deb	When was the debt incurred? 3/1/2020					
Numb	er Street								
			As of the date you	As of the date you file, the claim is: Check all that apply.					
Wilm	nington, DE 19886	S-5548	☐ Contingent						
City	_	ate ZIP (	Code Unliquidated						
,			☐ Disputed						
_	incurred the debt?	Check one.	Type of NONPRIO	RITY unsecured	l clain	n:			
	ebtor 1 only		☐ Student loans						
	ebtor 2 only		☐ Obligations aris	ing out of a sepa	ration	agree	ement or	divorce that you di	id not report as
	ebtor 1 and Debtor 2	•	priority claims	g out of a cope		. ag. oc		arrondo anar you a	a not roport do
	least one of the deb	for a community debt	Debts to pension		g plar	ns, and	d other s	similar debts	
	neck ii this ciaim is	for a community debt	✓ Other. Specify	CreditCard					
Is the	claim subject to of	fset?							
<b>₫</b> No	0								
☐ Ye	es								
4.16 Chas	se Card Services		Last 4 digits of ac	count number	3	9	2 4		\$1,998.00
Nonpr	iority Creditor's Name	e						_	
•	3ox 15548		When was the deb	ot incurred?		1/1/	2020		
Numb									
			As of the date you	ı file, the claim i	s: Ch	eck all	that app	ply.	
VA/:I	-i DE 4000	2.5540	☐ Contingent	As of the date you file, the claim is: Check all that apply.  — Contingent					
	nington, DE 19886		Unliquidated	■ ☐ Unliquidated					
City	State ZIP Code		Disputed						
Who i	incurred the debt?	Check one.	Time of NONDRIO	DITY	l ala!				
☐ De	Debtor 1 only			Type of NONPRIORITY unsecured claim:					
☐ De	ebtor 2 only		<del>-</del>	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
<b>√</b> D∈	ebtor 1 and Debtor 2	only							
☐ At	least one of the deb	tors and another		n or profit-sharin	a plar	ns. and	d other s	similar debts	
□ CH	heck if this claim is	for a community debt	<u></u>	Debts to pension or profit-sharing plans, and other similar debts					

Other Specify CreditCard

Is the claim subject to offset?

**☑** No ☐ Yes

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Debtor 1	Nicholas	Robert	Vincent	Case number (if k	nown) <b>24-42011</b>				
Debtor 2	Mary	Ellen	Robinson						
	First Name	Middle Name	Last Name						
Part 2:	Your NONPRIC	ORITY Unsecured C	Claims — Continuation P	age					
After listing	g any entries on thi	s page, number them	beginning with 4.4, followe	d by 4.5, and so forth.		Total claim			
4.17 Citib	oank, N.A.		Last 4 digits of a	account number 5	1 9 8	\$7,513.00			
	riority Creditor's Name  O S Corporate PI	9	When was the d	ebt incurred? 10	/01/2023				
Numb	oer Street								
			·	As of the date you file, the claim is: Check all that apply.					
Siou	ıx Falls, SD 57108	}	_	Contingent					
City	St	ate ZI	P Code Unliquidated Disputed						
De D	incurred the debt? ( ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 t least one of the deb heck if this claim is	only tors and another for a community debt	Type of NONPRI  Student loans Obligations a priority claims Debts to pens	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Line of Credit					
<b>₫</b> No	•								
☐ Ye	es								
4.18 Colle	ection Manageme	nt Company	Last 4 digits of a	account number 9 6	6 7 3	\$0.00			
	riority Creditor's Name								
Attn	: Bankruptcy Attr	: Bankruptcy	When was the d	ebt incurred? 5	/1/2023				
Numb	Andersen Drive, ber Street Sburgh, PA 15220	Suite 110	☐ Contingent	ou file, the claim is: Check	all that apply.				
City		ate ZI	P Code Unliquidated Disputed						
	incurred the debt?	Check one.	Type of NONPR	ORITY unsecured claim:					

☐ Student loans

lacksquare Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

☑ Other. Specify Collecting for Medstar Mobile Healthcare

☐ Debtor 1 only

Debtor 2 only

✓ No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and anotherCheck if this claim is for a community debt

ebtor	1	Nicholas	Robert	Vir	ncent	Case nur	mber (i	if knov	vn) <b>2</b>	4-42011	 
ebtor :	2	Mary	Ellen R		binson						
		First Name	Middle Name	Last	Name						
Par	t 2:	Your NONPRIC	ORITY Unsecured C	laims –	Continuation Pag	e					
After I	listing a	any entries on this	s page, number them b	eginnin	g with 4.4, followed b	y 4.5, and so fo	orth.				Total claim
4.19	Consu	ımer Adjustmen	t Co.		Last 4 digits of acc	ount number	3	5	0	6	\$0.00
1	Nonprior	rity Creditor's Name	•							_	
	500 No	orthwest Plaza 3	800		When was the deb	incurred?		12/1	/202	2	
1	Number	Street									
					As of the date you	file, the claim i	s: Che	ck all	that	apply.	
_	Saint /	Ann, MO 63074			Contingent						
-	City	Sta	ate 7IF	<sup>2</sup> Code	Unliquidated						
	,		<del></del>	Oodc	Disputed						
١	Who inc	curred the debt?	Check one.		Type of NONPRIOR	ITV unsecured	l claim				
	☐ Debtor 1 only			☐ Student loans	arr unsecured	Claiii	١.				
		tor 2 only			<ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify Collecting for Six Flags Over Texas</li> </ul>						
		tor 1 and Debtor 2	•								
		ast one of the debt									
Į	_ Che	ck if this claim is	for a community debt								
ı	s the cl	laim subject to off	set?		-						
	<b>√</b> No										
[	Yes										
4.20	Credit	Collection Serv	rices		Last 4 digits of acc	ount number	8	3	5	6	\$0.00
1	Nonprior	rity Creditor's Name	•		140 (1 1 1	. 10		~~			
	РО Во	x 9136			When was the deb	incurred?		2/1/	2023	<u> </u>	
1	Number	Street									
					As of the date you file, the claim is: Check all that apply.						
-	Needh	am Heights, MA	02494		Contingent						
-	City	Sta		<sup>2</sup> Code	Unliquidated						
	•			Disputed							
		curred the debt?	ineck one.		Type of NONPRIOR	RITY unsecured	l claim	ı:			
Į	Debt	tor 1 only		Type of NONPRIORITY unsecured claim:							

☐ Student loans

 $\hfill \square$  Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

☑ Other Specify Collecting for Geico County Mutual

Debtor 2 only

✓ No ☐ Yes

**☑** Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	

Ра	Your N	IONPRIORITY Unse	ecured Claims –	– Continuation Page				
After	listing any entrie	es on this page, numb	er them beginning	ng with 4.4, followed by 4.5, and so forth.	Total claim			
4.21	Credit Ninja			Last 4 digits of account number	\$1,000.00			
	Nonpriority Credito	or's Name		When was the debt incurred? 2024				
	222 South Riv	erside Plaza 2200		When was the debt incurred? 2024				
	Number	Street						
				As of the date you file, the claim is: Check all that apply.				
	Chicago, IL 60	0606		Contingent				
	City	State	ZIP Code	<ul><li>Unliquidated</li><li>□ Disputed</li></ul>				
	Who incurred the	e debt? Check one.		Type of NONPRIORITY unsecured claim:				
	Debtor 1 only			☐ Student loans				
	Debtor 2 only			☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	Debtor 1 and	•		priority claims	report as			
		of the debtors and anoth		Debts to pension or profit-sharing plans, and other similar debts				
	☑ Check if this claim is for a community debt  Is the claim subject to offset?			☑ Other. Specify Signature loan				
	☑ No							
	☐ Yes							
4.22	Credit One Ba	nk		Last 4 digits of account number	\$557.00			
	Nonpriority Credito	or's Name		When was the debt incurred? 2024				
	PO Box 98873	1		when was the dept incurred? 2024				
	Number	Street		-				
				As of the date you file, the claim is: Check all that apply.				
	Las Vegas, NV	/ 89193		☐ Contingent				
	City	State	ZIP Code	<ul> <li>Unliquidated</li> <li>□ Disputed</li> </ul>				
	Who incurred the	e debt? Check one.						
	☐ Debtor 1 only			Type of NONPRIORITY unsecured claim:				
	Debtor 2 only			☐ Student loans				
	☑ Debtor 1 and	•		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not priority claims</li> </ul>	report as			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card				
	Is the claim subj	ject to offset?						
	<b>☑</b> No							
	☐ Yes							

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011				
Debtor 2	Mary	Ellen	Robinson					
	First Name	Middle Name	Last Name					
Part 2:	Your NONPRIC	ORITY Unsecured Clai	ms — Continuation	Page				
After listing	g any entries on this	s page, number them beg	inning with 4.4, follow	ed by 4.5, and so forth. Total clair				
4.23 First	Bank & Trust		Last 4 digits of	f account number <u>4 0 1 3</u> \$1,819.				
Nonpi	iority Creditor's Name	9	When was the	debt incurred? 05/01/2023				
PO l	oox 70168		When was the	debt incurred? 05/01/2023				
Numb	er Street							
				you file, the claim is: Check all that apply.				
Phila	adelphia, PA 1917	6	☐ Contingent					
City	City State ZIP Code		ode Unliquidated					
Who	Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:  Student loans				
_								
	ebtor 1 and Debtor 2	only		Obligations arising out of a separation agreement or divorce that you did not report as				
☐ At	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Line of Credit				
☑ c								
Is the	Is the claim subject to offset? ☑ No		·					
_								
☐ Ye								
4.24 Geio	o County Mutual		Last 4 digits of	f account number 8 3 5 6 \$73.				
Nonpi	iority Creditor's Name	9						
P.O.	Box 55126		When was the	debt incurred? 02/01/2023				
Numb	Number Street							
				you file, the claim is: Check all that apply.				
Boston, MA 02205			Contingent					
City	•	ate ZIP C	ode Unliquidated	1				
Who	incurred the debt?	Shack one	☐ Disputed					
_	ebtor 1 only	JIIGUN UIIG.	Type of NONPI	RIORITY unsecured claim:				
	ebtor 2 only		☐ Student loar	☐ Student loans				

☑ Other. Specify Services

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

**☑** No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☑ Check if this claim is for a community debt

Debtor 1 Nicholas Robert Vir		Vincent	Case numb	er (if kno	<sub>wn)</sub> <u>24</u>	-42011		
Debtor 2	Mary	Ellen	Robinson					
	First Name	Middle Name	Last Name					
Part 2:	Your NONPRI	ORITY Unsecured Claim	s — Continuation Page					
After listing	g any entries on thi	s page, number them begin	ning with 4.4, followed by 4.5	, and so forth	h.			Total claim
4.25 Justice of the Peace Precinct Seven		Last 4 digits of account	number	2 8	2	0_	\$0.00	
Nonpriority Creditor's Name			When was the debt inc	When was the debt incurred? 2024				
1100	East Broad Stree	—	2024					
Number Street				As of the date you file the plain in Cheek all that apply				
			<del></del> _ ·	As of the date you file, the claim is: Check all that apply.				
Mansfield, TX 76063			Contingent					
City	City State ZIP Code		──					
Who i	incurred the debt?	Check one.	- (110117717717171					
☐ Debtor 1 only			Type of NONPRIORITY unsecured claim:					
☐ De	ebtor 2 only		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as					
<b>√</b> D∈	ebtor 1 and Debtor 2	9						
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts  ☑ Other. Specify Notice only					
								Is the
<b>☑</b> No								
☐ Ye	es							
4.26 Koh	l's		Last 4 digits of account	number	4 6	2	0	\$1,304.00

When was the debt incurred?

☐ Contingent

■ Unliquidated

☐ Student loans

priority claims

Disputed

ZIP Code

As of the date you file, the claim is: Check all that apply.

Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

☑ Other. Specify ChargeAccount

7/1/2016

Obligations arising out of a separation agreement or divorce that you did not report as

Nonpriority Creditor's Name

Los Angeles, CA 90030

Who incurred the debt? Check one.

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Street

PO Box 30510

☐ Debtor 1 only

Debtor 2 only

✓ No ☐ Yes

Number

ebtor	1	Nicholas	Robert	Vince	ent Cas	e number	(if kno	wn) <b>24-42011</b>		
ebtor :	2	Mary	Ellen	Robii	nson					
		First Name	Middle Name	Last Na	ame					
Par	t 2:	Your NONPRIC	ORITY Unsecured Cl	laims — Co	ontinuation Page					
After I	isting a	any entries on this	s page, number them b	eginning w	rith 4.4, followed by 4.5, and	so forth.			Total claim	
4.27	Lockh	art Morris & Mo	ntgomery, Inc.	L	ast 4 digits of account numb	ber 3	2	5 9	\$0.00	
1	Nonprior	rity Creditor's Name	9			_				
	Attn: E	Bankruptcy Attn	: Bankruptcy	V	When was the debt incurred? 3/1/2024					
_	1401 N	I Central Expres	sswav . Ste 225							
-	Number	•	, esc ===		As of the date you file, the cla	aim is: Ch	eck a	ll that apply.		
	Richar	dson, TX 75080	)		Contingent					
-	City				Unliquidated					
,	Nho inc	curred the debt?	Shack one	,	Disputed					
	Debtor 1 only				ype of NONPRIORITY unsec	cured clair	n:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			[	Student loans					
				Ţ	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>					
				Г						
[					✓ Other. Specify Collecting for Lonestar Hospital Medicine Ass.					
	s the cl	laim subject to off	fset?			<u>-</u>		•		
	<b>√</b> No	•								
	Yes									
4.28	Lones	tar Hospital Me	dicine Services	L	ast 4 digits of account numb	ber 3	2	5 9	\$623.00	
1	Nonprior	rity Creditor's Name	9		Mi	_		1/0001		
PO Box 1123				When was the debt incurred?	<b>_</b>	03/0	1/2024			
1	Number	Street								
_					As of the date you file, the cla	aim is: Ch	eck a	ll that apply.		
	Minne	apolis, MN 5544	10		Contingent					
-	City	•		Code	☐ Unliquidated☐ Disputed					
١	Nho inc	curred the debt?	Check one.	Ĺ	■ Disharea					
				1	ype of NONPRIORITY unsec	cured clair	n:			
,	Debtor 1 only			_	_					

☐ Student loans

priority claims

Other Specify Medical Bill

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

✓ No ☐ Yes

**☑** Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

ebtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011					
Debtor 2 Mary Ellen R		Robinson							
	First Name	Middle Name	Last Name						
Part 2:	Your NONDRIG	ORITY Unsecured Clai	ms — Continuation	Dana					
		s page, number them beg							
4.00	• .		,						
	v Funding/Resurg	•	Last 4 digits o	account number 1 6 1 1  \$0.0	\$0.00				
Nonp	riority Creditor's Name	)	When was the	debt incurred? 10/1/2023					
Attn	: Bankruptcy								
PO	Box 10497								
Numb	per Street			As of the date you file, the claim is: Check all that apply.					
Gree	enville, SC 29603		Contingent	•					
City		ate ZIP C	Unliquidate						
\ <b>A</b> /I	!	Nh a ala a a	☐ Disputed						
	incurred the debt?	neck one.	Type of NONP	RIORITY unsecured claim:					
	ebtor 1 only		☐ Student loa	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separation agreement or divorce that you did not report as</li></ul>					
_	ebtor 2 only		=						
	ebtor 1 and Debtor 2	•	priority clair	ns					
_	t least one of the debt			nsion or profit-sharing plans, and other similar debts					
	neck if this claim is	for a community debt	✓ Other. Specentrical Spec	ify Collecting for Webbank					
Is the	claim subject to off	set?							
<b>⊴</b> N	☑ No								
☐ Y	es								
4.30 Mod					_				
IVIEU	Istar Mobile Health		Last 4 digits o	account number 9 6 7 3 \$616.0	0				
Nonpriority Creditor's Name		When was the	debt incurred? 05/01/2023						
2900	00 Alta Mere			00/01/2020					
Numb	oer Street								
				you file, the claim is: Check all that apply.					
Fort	Worth, TX 76116		0	Contingent					
City State ZIP Code		ode	Unliquidated						
Who incurred the debt? Check one.			☐ Disputed						
_		DIEUN UIE.	Type of NONP	RIORITY unsecured claim:					
_	ebtor 1 only		☐ Student loa	ns					
	ebtor 2 only	anh.		☐ Obligations arising out of a separation agreement or divorce that you did not report as					
VII)	antar 1 and Hantar 2	nniv							

priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other Specify Medical Bill

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

**☑** No ☐ Yes

☐ At least one of the debtors and another ☑ Check if this claim is for a community debt

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011				
Debtor 2	Mary	Ellen	Robinson					
	First Name	Middle Name	Last Name					
Part 2:	Your NONPRI	ORITY Unsecured Cl	aims — Continuation	Page				
After listi	ng any entries on thi	s page, number them be	eginning with 4.4, follow	red by 4.5, and so forth.	otal claim			
Non <sub> </sub> Att	Midland Credit Mgmt  Nonpriority Creditor's Name  Attn: Bankruptcy  PO Box 939069  Number Street  San Diego, CA 92193  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt		When was the	debt incurred?  10/1/2023  you file, the claim is: Check all that apply.	\$0.00			
Sar			Code Code	☐ Contingent ☐ Unliquidated				
<b>\</b>			Type of NONPI  Student loan Obligations priority clain Debts to per					

Attn: Bankruptcy  PO Box 939069 Number Street San Diego, CA 92193 City State ZIP Code  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report priority claims Debts to pension or profit-sharing plans, and other similar debts	Midland Credit Mgmt	Last 4 digits of account number 4 0 1 3 \$0			
As of the date you file, the claim is: Check all that apply.    Contingent   Unliquidated	Nonpriority Creditor's Name Attn: Bankruptcy				
City State ZIP Code  Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report priority claims Debts to pension or profit-sharing plans, and other similar debts					
City State ZIP Code Disputed  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Debts to pension or profit-sharing plans, and other similar debts		_			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts	City State ZIP Code	·			
Total Collecting for First Bank Trust	☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>			

Nicholas	Robert	Vincent	Case number (if known) 24-42011
Mary	Ellen	Robinson	
First Name	Middle Name	Last Name	

Pa	Your NONPRIORITY Unsecured Claims –	- Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim				
4.33	Nelnet	Last 4 digits of account number 0 4 3 5 \$8,712.00				
	Nonpriority Creditor's Name					
	PO Box 82505	When was the debt incurred? 12/1/2018				
	Number Street	•				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501-2505	☐ Contingent				
	City State ZIP Code	□ Unliquidated □ Disputed				
	Who incurred the debt? Check one.	☐ Disputed				
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	<ul> <li>✓ Student loans</li> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community debt	☐ Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.34	Nelnet	Last 4 digits of account number 0 2 3 5 \$7,844.00				
	Nonpriority Creditor's Name	<u> </u>				
	PO Box 82505	When was the debt incurred? 12/1/2017				
	Number Street	•				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501-2505	☐ Contingent				
	City State ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>				
	Who incurred the debt? Check one.	'				
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	☐ Debtor 2 only	☑ Student loans				
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as				
	☐ At least one of the debtors and another	priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

Debtor 1	Nicholas Robert		Vincent	Case number (if known) 24-42011	
Debtor 2	Mary	Ellen	Robinson		
	First Name	Middle Name	Last Name		
Part 2:	Your NONPRI	ORITY Unsecured C	laims — Continuation F	Page	
After listing	any entries on thi	s page, number them b	peginning with 4.4, follower	ed by 4.5, and so forth.	Total claim

After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.	Total claim				
4.35	Nelnet	Last 4 digits of account number	9 6 3 5	\$7,353.00				
	Nonpriority Creditor's Name	- <u> </u>						
	PO Box 82505	When was the debt incurred?	7/1/2015					
	Number Street	•						
		As of the date you file, the claim is	: Check all that apply.					
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	Unliquidated Disputed						
	Who incurred the debt? Check one.	■ Disputed						
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured  Student loans						
	<ul><li>✓ Debtor 1 and Debtor 2 only</li><li>✓ At least one of the debtors and another</li></ul>	<ul> <li>Obligations arising out of a separ priority claims</li> <li>Debts to pension or profit-sharing</li> </ul>		did not report as				
	☐ Check if this claim is for a community debt	Other. Specify						
	Is the claim subject to offset?							
	✓ No							
	☐ Yes							
4.36	Nelnet	Last 4 digits of account number	9 8 3 5	\$7,164.00				
	Nonpriority Creditor's Name	When was the debt incurred? 3/1/2016						
	PO Box 82505	when was the debt incurred:	3/1/2010					
	Number Street							
		As of the date you file, the claim is	: Check all that apply.					
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	olaim.					
	Debtor 1 only	Student loans	Ciaiii.					
	Debtor 2 only							
	Debtor 1 and Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify</li> </ul>						
	At least one of the debtors and another							
	☐ Check if this claim is for a community debt							
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	
Dort Or	Yawa NONDRIA	ODITY II commad C	lai Caudiu	w Bana

I G	Tour NONPRIORITY Onsecured Claims	•						
	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so forth.  Total claim						
4.37	Nelnet	Last 4 digits of account number 0 1 3 5 \$5,683.00						
	Nonpriority Creditor's Name							
	PO Box 82505	When was the debt incurred? 12/1/2017						
	Number Street	-						
		As of the date you file, the claim is: Check all that apply.						
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>						
	Who incurred the debt? Check one.	□ Disputed						
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	Debtor 2 only	☑ Student loans						
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as						
	☐ At least one of the debtors and another	priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify						
	☐ Check if this claim is for a community debt							
	Is the claim subject to offset?	·						
	☑ No							
	☐ Yes							
4.38	Nelnet	Last 4 digits of account number 9 9 3 5 \$5,655.0						
	Nonpriority Creditor's Name	When we the debt in some 10						
	PO Box 82505	When was the debt incurred? 1/1/2017						
	Number Street	_						
		As of the date you file, the claim is: Check all that apply.						
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	<ul><li>☐ Unliquidated</li><li>☐ Disputed</li></ul>						
	Who incurred the debt? Check one.	a biopated						
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:						
	☐ Debtor 2 only	☑ Student loans						
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as						
	☐ At least one of the debtors and another	priority claims						
	☐ Check if this claim is for a community debt	<ul><li>Debts to pension or profit-sharing plans, and other similar debts</li><li>Other. Specify</li></ul>						
	Is the claim subject to offset?	_ <del></del>						
	☑ No							
	_ Yes							

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	

Pa	Tour NONPRIORITY Onsecured Claims –	- Continuation Page						
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim					
4.39	Nelnet	Last 4 digits of account number 0 0 3 5	\$5,156.00					
	Nonpriority Creditor's Name	<del></del>	· ·					
	PO Box 82505	When was the debt incurred? 1/1/2017						
	Number Street	-						
		As of the date you file, the claim is: Check all that apply.						
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed						
	Who incurred the debt? Check one.	•						
	☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:  ☑ Student loans						
	☐ Debtor 2 only							
	☑ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as						
	At least one of the debtors and another	priority claims  Debts to pension or profit-sharing plans, and other similar debts						
	☐ Check if this claim is for a community debt	Other. Specify						
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							
4.40	Nelnet	Last 4 digits of account number 9 7 3 5	\$4,644.00					
	Nonpriority Creditor's Name							
	PO Box 82505	When was the debt incurred? 3/1/2016						
	Number Street	•						
		As of the date you file, the claim is: Check all that apply.						
	Lincoln, NE 68501-2505	☐ Contingent						
	City State ZIP Code	Unliquidated						
	Who incurred the debt? Check one.	☐ Disputed						
	_	Type of NONPRIORITY unsecured claim:						
	☐ Debtor 1 only ☐ Debtor 2 only	☑ Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did no	t report as					
	☐ At least one of the debtors and another	priority claims						
	☐ Check if this claim is for a community debt	<ul><li>Debts to pension or profit-sharing plans, and other similar debts</li><li>Other. Specify</li></ul>						
	Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·						
	☑ No							
	☐ Yes							

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
•	First Name	Middle Name	Last Name	

Pa	Your NONPRIORITY Unsecured Claims –	- Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.					
4.41	Nelnet	Last 4 digits of account number 0 3 3 5 \$4,151.00					
	Nonpriority Creditor's Name						
	PO Box 82505	When was the debt incurred? 12/1/2018					
	Number Street	•					
		As of the date you file, the claim is: Check all that apply.					
	Lincoln, NE 68501-2505	☐ Contingent					
	City State ZIP Code	- 🔲 Unliquidated					
	,	☐ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	☐ Debtor 1 only	☑ Student loans					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
	At least one of the debtors and another	priority claims					
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts					
	a check if this claim is for a community dest	Other. Specify					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						
4.42	Nelnet	Last 4 digits of account number 9 5 3 5 \$3,612.00					
	Nonpriority Creditor's Name	When were the debt in summed 0					
	PO Box 82505	When was the debt incurred? 7/1/2015					
	Number Street	•					
		As of the date you file, the claim is: Check all that apply.					
	Lincoln, NE 68501-2505	☐ Contingent					
	City State ZIP Code	Unliquidated					
	Who in summed the idebt O Oberdanie	☐ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	☐ Debtor 1 only ☐ Debtor 2 only	☑ Student loans					
	✓ Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
	At least one of the debtors and another	priority claims					
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts					
		Other. Specify					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	
Part	2) Your NONDRI	OPITY Uncopured C	laims — Continuation P	lana.
	sting any entries on thi	is page, number them b	peginning with 4.4, followe	ed by 4.5, and so forth.
_	NTTA		Last 4 digits of	account number 1 7 9 3 \$179.9
N	onpriority Creditor's Nam	е	When was the d	debt incurred? 2024
_5	900 West Plano Pkw	/y		<u>2024</u>
N	umber Street			
			As of the date y	ou file, the claim is: Check all that apply.
F	Plano, TX 75093		☐ Contingent	
_	•	tate ZI	P Code Unliquidated	
	•		☐ Disputed	
	/ho incurred the debt?	Check one.	Type of NONPR	IORITY unsecured claim:
	Debtor 1 only		☐ Student loan:	
	Debtor 2 only			sarising out of a separation agreement or divorce that you did not report as
	Debtor 1 and Debtor 2	•	priority claims	
_	At least one of the deb Check if this claim is			sion or profit-sharing plans, and other similar debts
	Check if this claim is	for a community debt	Other. Specif	fy Tolls
Is	the claim subject to of	ffset?		
V	<b>1</b> No			
	Yes			
4.44 F	Plus Finance		Last 4 digits of	account number 1 3 0 3 \$1,247.
N	onpriority Creditor's Nam	е		
F	Po Box 9203		When was the d	debt incurred? 9/1/2022
N	umber Street			
			As of the date y	ou file, the claim is: Check all that apply.
-	Nal Dathmana NY 444	004 0000	☐ Contingent	•••
_	Old Bethpage, NY 118		— ☐ Unliquidated	
C	ity S	tate ZI	P Code Disputed	
W	/ho incurred the debt?	Check one.	·	
	Debtor 1 only		Type of NONPR	IORITY unsecured claim:

☐ Student loans

☑ Other. Specify CreditCard

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

✓ No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another☐ Check if this claim is for a community debt

ebtor 1		Nicholas	Robert	Vir	ncent	Case nur	nber (	if known)	24-420	11		
ebtor	2	Mary Ellen		Ro	binson	<u> </u>	,	,				
		First Name	Middle Name	Las	t Name							
Par	t 2:	Your NONPRI	ORITY Unsecured C	laims –	Continuation P	age						
After	listing a	ny entries on thi	s page, number them b	peginnin	g with 4.4, followe	ed by 4.5, and so fo	orth.				Total claim	
4.45	Portfo	lio Recovery As	ssociates, LLC		Last 4 digits of	account number	2	8 5	6		\$0.00	
-		ity Creditor's Name										
	Citibar	nk/Best Buy			When was the d	lebt incurred?		10/1/2	023			
-	PO Bo	x 41067										
-	Number	Street			As of the date y	ou file, the claim is	s: Che	ck all th	at apply.			
	Norfol	k, VA 23541		☐ Contingent								
-	City State ZIP Code				<ul> <li>Unliquidated</li> <li>Disputed</li> </ul>							
,	Who inc	curred the debt?	Check one.	_ '								
		tor 1 only			IORITY unsecured	claim	:					
	Debtor 2 only  Debtor 1 and Debtor 2 only				<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>							
I												
	☐ At least one of the debtors and another				☐ Debts to pension or profit-sharing plans, and other similar debts							
l	_ Che	ck if this claim is	for a community debt		Other Specify Collecting for Synchrony Bank							
ı	s the cl	aim subject to of	fset?									
1	<b>√</b> No											
I	☐ Yes											
4.46	Portfo	lio Recovery As	ssociates. LLC		Last 4 digits of	account number	5	5 5	3		\$0.00	
-		ity Creditor's Name	·								·	
	Citibar	nk/Best Buy			When was the debt incurred? 1/1/2024							
-	РО Во	x 41067										
Ī	Number	Street			-	ou file, the claim is	s: Che	ck all th	at apply.			
	Norfol	k, VA 23541		Contingent								
(	City	St	ate ZII	<ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> </ul>								
,	Who inc	curred the debt?	Check one.		☐ Disputed							
		tor 1 only			Type of NONPR	IORITY unsecured	clain	ı:				
		tor 2 only		Student loans								
		tor 1 and Debtor 2	only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>								
		ast one of the deb			_ ' '		g plan	s, and o	ther simi	lar debts		
	Objects if this states in face a community state.				Debts to pension or profit-sharing plans, and other similar debts							

☑ Other Specify Collecting for Synchrony Bank

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Is the claim subject to offset?

**☑** No ☐ Yes

Debtor	r <b>1</b>	Nicholas	Robert	Vii	ncent	Case number	er (if known) 24-42011	
Debtor	2	Mary	Ellen	Ro	binson			
		First Name	Middle Name	Las	t Name			
Pa	rt 2:	Your NONPRIC	ORITY Unsecured C	laims –	- Continuation Pa	ge		
After	listing	any entries on this	s page, number them l	beginnin	g with 4.4, followed	by 4.5, and so forth	1.	Total claim
4.47	Power	r Finance			Last 4 digits of a	ccount number	<u> </u>	\$1,250.00
	•	rity Creditor's Name Tomball Parkwa			When was the de	bt incurred?	2024	
	Number	r Street			-	u file, the claim is: (	Check all that apply.	
	Tomb	all, TX 77375			Contingent			
	City	St	ate ZI	P Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>			
	Deb Deb Deb At le	laim subject to of	only tors and another for a community debt		Student loans Obligations ari priority claims Debts to pensi		aim: ion agreement or divorce i	
4.48		Finance			Last 4 digits of a	ccount number		\$800.00
	-	rity Creditor's Name Tomball Parkwa			When was the de	bt incurred?	2024	
	Number	Street			_	u file, the claim is: (	Check all that apply.	
	Tomb	all, TX 77375			Contingent			
	City	St	ate ZI	P Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>			
	☐ Deb	curred the debt? (	Check one.		•	ORITY unsecured cla	aim:	

 $oldsymbol{\square}$  Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Signature loan

Debtor 2 only

**☑** No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☑ Check if this claim is for a community debt

Debtor	r <b>1</b>	Nicholas	Robert	Vii	ncent	Case num	ber (if	known)	24-4201	1	
Debtor	2	Mary	Ellen	Ro	binson						
		First Name	Middle Name	Las	t Name						
Pa	rt 2:	Your NONPRI	ORITY Unsecured C	laims –	- Continuation Pa	age					
After	listing	any entries on thi	s page, number them	beginnin	g with 4.4, followed	d by 4.5, and so for	rth.				Total claim
4.49	Progr	ess Residential			Last 4 digits of a	account number					\$5,100.00
	•	rity Creditor's Name	Э		When was the de	ebt incurred?		2024			
	Number	Street			•						
					_	ou file, the claim is	: Chec	k all tha	t apply.		
	Scotts	sdale, AZ 85261			Contingent						
	City	·	ate ZI	P Code	- Unliquidated						
	,				Disputed						
	_	curred the debt?	Check one.		Type of NONPRI	ORITY unsecured	claim:				
		otor 1 only			☐ Student loans	<b>3</b>					
		otor 2 only				rising out of a separa	ation a	greeme	nt or divo	rce that yo	ou did not report as
		tor 1 and Debtor 2	•		priority claims	;				•	
		east one of the deb	tors and another for a community debt			sion or profit-sharing		and oth	er simila	r debts	
	VI Che	ck if this claim is	for a community debt		✓ Other. Specify	Lease deficien	су			_	
	Is the c	laim subject to of	fset?								
	<b>☑</b> No										
	☐ Yes										
4.50	Resid	ential Home Ow	ner 1, LLC		Last 4 digits of a	account number	2	8 2	0		\$0.00
	Nonprio	rity Creditor's Name	е								
	4151 8	SW Frwy 680			When was the de	ebt incurred?		2024			
	Number	Street			•						
					As of the date yo	ou file, the claim is	: Chec	k all tha	t apply.		
	Houst	on, TX 77027			Contingent						
	City	•	ate ZI	P Code	<ul> <li>Unliquidated</li> </ul>						
	,			. Code	Disputed						
	Who in	curred the debt?	Check one.		Type of NONDRI	ORITY unsecured	claim:				
		tor 1 only					Cidiiii:				
	Doh	tor 2 only			Student loans	3					

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

**☑** No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☑ Check if this claim is for a community debt

☑ Other. Specify Judgement

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
•	First Name	Middle Name	Last Name	

	listing any entries on this page, number them begin	ning with 4.4, followed by 4.5, and so forth.  Total claim					
4.51	Six Flags Over Texas	Last 4 digits of account number 3 5 0 6 \$395.00					
	Nonpriority Creditor's Name						
	2201 E Road to Six Flags	When was the debt incurred? 12/01/2022					
	Number Street	<del>_</del>					
		As of the date you file, the claim is: Check all that apply.					
	Arlington, TX 76010	☐ Contingent					
	City State ZIP Cod	Unliquidated					
	Who incurred the debt? Check one.	☐ Disputed					
	_	Type of NONPRIORITY unsecured claim:					
	Debtor 1 only Debtor 2 only	☐ Student loans					
	✓ Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
	☐ At least one of the debtors and another	priority claims					
	☐ Check if this claim is for a community debt	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify Line of Credit</li> </ul>					
		Line of Credit					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						
4.52	SYNCB/Care Credit	Last 4 digits of account number \$774.00					
	Nonpriority Creditor's Name	When was the debt incurred? 2024					
	170 W. Election Road	When was the debt incurred? 2024					
	Number Street	<del>_</del>					
		As of the date you file, the claim is: Check all that apply.					
	Draper, UT 84020	Contingent					
	City State ZIP Cod	Unliquidated					
	,	□ Disputed					
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
	Debtor 1 only	☐ Student loans					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as					
	At least one of the debtors and another	priority claims					
	✓ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Line of Credit					
	·	☑ Other. Specify Line of Credit					
	Is the claim subject to offset?						
	☑ No						
	☐ Yes						

ebtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011		
ebtor 2	Mary	Ellen	Robinson	_		
	First Name	Middle Name	Last Name			
Part 2	Your NONPRIC	ORITY Unsecured Clain	ns — Continuation Page			
After list	ting any entries on thi	s page, number them begi	nning with 4.4, followed by 4	.5, and so forth.	Total claim	
4.53 <b>S</b> \	YNCB/Care Credit		Last 4 digits of accoun	nt number	\$3,397.00	
No	npriority Creditor's Name	е	When was the debt inc	curred? 2024		
17	0 W Election Rd			2024		
Nu	mber Street					
_				, the claim is: Check all that apply.		
Dr	raper, UT 84020-640	0	Contingent Unliquidated			
City	y St	ate ZIP Co	ode Disputed			
Wh	no incurred the debt?	Check one.	·			
	Debtor 1 only		Type of NONPRIORITY	/ unsecured claim:		
	Debtor 2 only		☐ Student loans			
$\mathbf{\Delta}$	Debtor 1 and Debtor 2	only	<ul><li>Obligations arising of priority claims</li></ul>	out of a separation agreement or divorce th	at you did not report as	
	At least one of the deb	tors and another		profit-sharing plans, and other similar debt	ts	
	Check if this claim is	for a community debt	✓ Other. Specify Lin			
ls t	the claim subject to of	fset?				
_	No					
_	Yes					
4.54 <b>S</b> y	nchrony Bank		Last 4 digits of accou	nt number 2 8 5 6	\$2,538.00	
No	npriority Creditor's Name	e		<del></del>		
P.0	O. Box 965073		When was the debt inc	curred? 10/01/2023		
Nu	mber Street					
			As of the date you file	, the claim is: Check all that apply.		
Oı	rlando, FL 32896		☐ Contingent			
City	•	ate ZIP Co	unliquidated			
			☐ Disputed			

Type of NONPRIORITY unsecured claim:

☑ Other. Specify Line of Credit

 $\hfill \square$  Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

☐ Debtor 1 only

☐ Debtor 2 only

✓ No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011	
Debtor 2	Mary	Ellen	Robinson		
	First Name	Middle Name	Last Name		
Part	2: Your NONPRI	ORITY Unsecured C	laims — Continuation P	age	
After lis	sting any entries on thi	s page, number them b	eginning with 4.4, followe	d by 4.5, and so forth.	Total claim
4.55 <b>S</b>	ynchrony Bank		Last 4 digits of a	account number 5 5 5 3	\$1,955.00
<u>P</u> .	onpriority Creditor's Name	е	When was the d	ebt incurred? 01/01/2024	
Nu	umber Street		·	ou file, the claim is: Check all that apply.	
0	rlando, FL 32896		☐ Contingent☐ Unliquidated☐		
Ci	ty St	ate ZII	Code Disputed		
	ho incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim is the claim subject to of No Yes	only tors and another for a community debt	☐ Student loans ☐ Obligations a priority claims ☐ Debts to pens	rising out of a separation agreement or divorce t	
No.	ynchrony Bank/PPC onpriority Creditor's Name 70 W. Election Road umber Street	е	When was the d	<del></del> _	\$775.00
	ty St	ate ZII	Code Code Code Code Code Code Code Code	ou me, me ciam is. Oneon an mat apply.	

Type of NONPRIORITY unsecured claim:

☑ Other. Specify Line of Credit

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Student loans

priority claims

Who incurred the debt? Check one.

☐ At least one of the debtors and another

☑ Check if this claim is for a community debt

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ Debtor 1 only

☐ Debtor 2 only

✓ No ☐ Yes

Debtor '	Nicholas	Robert	Vir	ncent	Case nun	nber (if	known) _	24-42011	
Debtor 2	2 Mary	Ellen	Ro	binson	_				
	First Name	Middle Name	Las	t Name	-				
Par	Your NONPRI	ORITY Unsecured C	laims –	Continuation Page					
After I	isting any entries on th	is page, number them b	eginnin	g with 4.4, followed by 4.5	5, and so fo	rth.			Total claim
4.57	Synchrony Bank/Roo	oms To Go		Last 4 digits of account	t number	6	1 0	0	\$1,912.00
1	Nonpriority Creditor's Nam	ne		When was the debt inc	urro d'O		0/4/00/	04	
	Attn: Bankruptcy			When was the debt inco	urrea?	1	2/1/20	21	
	PO Box 965060					0.1			
	lumber Street			As of the date you file,	the claim is	s: Chec	k all tha	t apply.	
	Orlando, FL 32896-50	060		<ul><li>Contingent</li><li>Unliquidated</li></ul>					
	City S	tate ZIF	<sup>2</sup> Code	☐ Disputed					
() 6 0 0	Who incurred the debt?  ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 ☐ At least one of the det ☐ Check if this claim is ☐ the claim subject to o ☑ No ☐ Yes	2 only otors and another a for a community debt		Type of NONPRIORITY  ☐ Student loans ☐ Obligations arising or priority claims ☐ Debts to pension or p  ☑ Other. Specify Cha	ut of a sepai	ration a	greeme		
4.58	Synchrony/PayPal C	redit		Last 4 digits of account	t number	4	7 8	1_	\$2,042.00
N	Nonpriority Creditor's Nam	ne		When was the debt inc	urred?		1/1/202	12	
	Attn: Bankruptcy			·	uou .		17 17202	<u> </u>	
<u> </u>	PO Box 965060			As of the date you file,	the claim is	Choc	yk all tha	t apply	
1	Number Street			Contingent	tile Claim is	s. Onec	n all lila	ι αρριγ.	
_	Orlando, FL 32896-50			Unliquidated					
	City S	tate ZIF	P Code	☐ Disputed					
	Who incurred the debt? ☐ Debtor 1 only ☐ Debtor 2 only	Check one.		Type of NONPRIORITY  Student loans	unsecured	claim:			

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

☑ Other. Specify CreditCard

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No ☐ Yes

At least one of the debtors and anotherCheck if this claim is for a community debt

Debtor 1	Nicholas	Robert	Vin	cent	Case numb	er (if known) <b>24-4</b> .	2011	
Debtor 2	Mary	Ellen	Rol	oinson				
	First Name	Middle Name	Last	Name				
Part 2:	Your NONPRI	ORITY Unsecured C	laims —	Continuation Pa	ige			
After listing	any entries on thi	s page, number them b	eginning	with 4.4, followed	l by 4.5, and so fort	h.		Total claim
4.59 TBO	TBOM/Contfin			Last 4 digits of account number  When was the debt incurred? 2024				\$972.00
Nonpri	priority Creditor's Name							
121 C	ontinental Dr St	e 1		When was the ac	-	2024	_	
Numbe	er Street			As of the date yo	ou file, the claim is:	Check all that app	oly.	
Newa	ırk, DE 19713-43	26		Contingent				
City	,		P Code	<ul><li>■ Unliquidated</li><li>■ Disputed</li></ul>				

	I BOW/Contrin	Last 4 digits of account number					
	Nonpriority Creditor's Name	Wilhow was the debt incomed?					
	121 Continental Dr Ste 1	When was the debt incurred? 2024					
	Number Street						
		As of the date you file, the claim is: Check all that apply.					
	Newark, DE 19713-4326 City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed					
	□ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another ☑ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ Credit Card					
	Is the claim subject to offset? ☑ No ☐ Yes						
4.60	Texas Health Resources	Last 4 digits of account number \$75.00					
	Nonpriority Creditor's Name	When we the debt incorred?					
	By American Infosource as agent	When was the debt incurred? 2024					
	P.O. Box 4457	As of the date was file the plains in Oharla II that each					
	Number Street	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>Contingent</li> </ul>					
	Houston, TX 77210	- ☐ Unliquidated					
	City State ZIP Code	☐ Disputed					
	Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☑ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical					
	☐ Yes						

Debtor 1	Nicholas	Robert			Case number (if know	<sub>1)</sub> <b>24-42011</b>			
Debtor 2	Mary First Name	Ellen Middle Name	Last N	inson lame					
Part 2:		ORITY Unsecured Cl			-		Total claim		
404				,	•		\$75.00		
Nonpri	Texas Health Resources  Nonpriority Creditor's Name  By American Infosource as agent			Last 4 digits of account number \$75  When was the debt incurred? 2024					
P.O. I	Box 4457			As of the date you file, the claim is: Check all that apply.					
Number House City	ston, TX 77210	ate ZIF	P Code	☐ Contingent☐ Unliquidated☐ Disputed☐	ou me, me claim is. Check an	шат арргу.			
Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☑ Check if this claim is for a community debt				Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical					

Texas Health Resources  Nonpriority Creditor's Name  By American InfoSource as Agent		ent	Last 4 digits of account number  When was the debt incurred? 202				
P.O. Box 4	457		- As of the date you file, the claim is: Check all the	nat annly			
Number	Street		☐ Contingent	и прру			
Houston, TX 77210-4457			<ul> <li>Unliquidated</li> </ul>				
City	State	ZIP Code	☐ Disputed				
_	d the debt? Check one.		Type of NONPRIORITY unsecured claim:				
☐ Debtor 1	•		☐ Student loans				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report priority claims</li> </ul>				
			Debts to pension or profit-sharing plans, and o	other similar debts			
☑ Check if	this claim is for a comm	unity debt	☑ Other. Specify Medical				

Other Specify Medical

**☑** No ☐ Yes

Is the claim subject to offset?

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
	First Name	Middle Name	Last Name	

	Your NONPRIORITY Unsecured Claims —	
	r listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.  Total claim
4.63	Texas Health Resources  Nonpriority Creditor's Name  By American Infosource as agent	Last 4 digits of account number \$75.00  When was the debt incurred? 2024
	P.O. Box 4457  Number Street  Houston, TX 77210  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical
4.64	Upgrade, Inc. Nonpriority Creditor's Name Po Box 52210	Last 4 digits of account number\$2,477.00  When was the debt incurred? 2024
	Phoenix, AZ 85072-2210 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed
	Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ☑ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Payday Loan

Debtor	THOHOLO	Robert		ncent	Case nur	_ Case number (if known) _24-42011			
Debtor 2		Ellen		binson					
	First Name	Middle Name	Last	t Name					
Par	Your NON	PRIORITY Unsecured	Claims –	Continuation Pa	ıge				
After I	isting any entries o	n this page, number them	beginning	g with 4.4, followed	by 4.5, and so fo	orth.	Total claim		
4.65	Upgrade, Inc.			Last 4 digits of a	ccount number		\$3,491.00		
_	Nonpriority Creditor's	Name					40,101100		
	Po Box 52210			When was the de	ebt incurred?	2024			
_		reet							
				As of the date yo	u file, the claim i	s: Check all that apply.			
	Phoenix, AZ 8507	2-2210		☐ Contingent					
_	City		IP Code	<ul><li>Unliquidated</li><li>Disputed</li></ul>					
() () () () () () () () () () () () () (	Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☑ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No		t	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not rep priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Personal loan					
4.00	່ Yes 			Last 4 digits of a	ccount number	1 6 1 1	\$1,491.00		
<u></u>	Nonpriority Creditor's	Name							
	215 S State St 100	00		When was the de	ebt incurred?	10/01/2023			
1	Number St	reet							
_					u file, the claim i	s: Check all that apply.			
	Salt Lake City, UT	84111		Contingent					
0	City	State Z	IP Code	Unliquidated Disputed					
١ ،	Who incurred the de	ebt? Check one.		☐ Disputed					
	Debtor 1 only			Type of NONPRIC	ORITY unsecured	claim:			

☐ Student loans

☑ Other. Specify Credit Card

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

✓ No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another ☐ Check if this claim is for a community debt

Debtor	1	Nicholas	Robert	Vi	ncent	Case nur	nber (	if knov	<sub>Nn)</sub> _2	4-42011		
Debtor	2	Mary	Ellen	Ro	binson							
		First Name	Middle Name	Las	t Name							
Pa	rt 2:	Your NONPRIC	ORITY Unsecured C	laims –	Continuation P	age						
After	listing	any entries on this	s page, number them l	beginnin	g with 4.4, followe	d by 4.5, and so fo	rth.				Total claim	
4.67	Westl	ake Financial Se	ervices	Last 4 digits of	account number	4	9	5	2	\$3,947.00		
	Nonprio	ority Creditor's Name	е	<del></del>								
	4751	Wilshire Bvd Su	ite 100	When was the d	lebt incurred?		1/1/	/201 <sup>-</sup>	<u> </u>			
	Numbe	r Street		•								
					As of the date you file, the claim is: Check all that apply.							
	I os A	ingeles, CA 9001	10	☐ Contingent								
	City	<u> </u>		P Code	<ul> <li>Unliquidated</li> </ul>							
	•				Disputed							
	_	curred the debt?	Check one.	Type of NONPR	IORITY unsecured	clain	1:					
	☐ Debtor 1 only ☐ Debtor 2 only				☐ Student loans							
		,		☐ Obligations arising out of a separation agreement or divorce that you did not report as								
		otor 1 and Debtor 2 east one of the deb	•		priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts							
			for a community debt									
		sck ii tilis cialili is	ioi a community debt		✓ Other. Specify Repo deficiency							
	Is the c	laim subject to of	fset?									
	<b>☑</b> No											
	☐ Yes	i										
4.68	ZZoui	nds			Last 4 digits of	account number					\$773.94	
	Nonprio	ority Creditor's Name	е			laht ima			004			
	8 Tho	rnton Rd			When was the d	lebt incurred?		21	024			
	Numbe	r Street		•								
				As of the date y	ou file, the claim is	: Che	eck al	I that	apply.			
	Oakla	ınd, NJ 07436		Contingent								
	City		ate ZI	Unliquidated								
	•			P Code	Disputed							
	Who in	curred the debt?	Check one.									

Type of NONPRIORITY unsecured claim:

☑ Other. Specify Personal loan

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts

■ Student loans

priority claims

☐ Debtor 1 only

☐ Debtor 2 only

✓ No ☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

lacksquare At least one of the debtors and another

☑ Check if this claim is for a community debt

Debtor 1 Nicholas Robert Vincent Case number (if known) 24-42011

Debtor 2

Mary	Ellen	Robinson	
First Name	Middle Name	Last Name	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Add the ar	mount	ts for each type of unsecured claim.			
					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+	\$2,025.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	j	\$2,025.00
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		\$59,974.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$73,460.93
	6j.	Total. Add lines 6f through 6i.	6j.	ļ	\$133,434.93

Fill in this informatio	on to identify your case:			
Debtor 1	Nicholas	Robert	Vincent	
	First Name	Middle Name	Last Name	
Debtor 2	Mary	Ellen	Robinson	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	N	orthern District of Texas	
Case number (if known)	24-42011			
(II KIIOWII)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or c	ompany with whom	n you ha	ve the contract or lease	State what the contract or lease is for		
2.1	Name	at Burleson, LLC	;		Residential Lease Contract to be ASSUMED		
	Number	Street					
	City	n, TX 76028	State	ZIP Code			
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code			
2.3							
	Name						
	Number	Street					
	City		State	ZIP Code			
2.4							
	Name						
	Number	Street					
	City		State	ZIP Code			

Fill in	n this inform	nation to identify your	case:				
Del	otor 1	Nicholas	Robert	Vincent			
		First Name	Middle Name	Last Name	!		•
Del	otor 2	Mary	Ellen	Robinso	n		
	ouse, if filing)		Middle Name	Last Name			•
Uni	ted States I	Bankruptcy Court for the	he· North	ern [	District of	Texas	
		. ,					
	nown)	24-42011					Check if this is an amended filing
Offic	cial For	m 106H					
Sc	hedu	le H: Your	Codebto	rs			12/15
the er	ntries in the n). Answer		Attach the Additiona	l Page to this p	page. On the	top of any Additiona	, copy the Additional Page, fill it out, and numbe al Pages, write your name and case number (if
	No. G	, Idaho, Louisiana, Ne io to line 3. Did your spouse, formo o es. In which communit	er spouse, or legal eq	uivalent live wit	h you at the ti	me?	he name and current address of that person.
	<u> </u>	Robinson, Mary Ell	len				
	N	lame of your spouse, f	ormer spouse, or leg	al equivalent			
	_	1217 Camden Yard	Dr				
		lumber	Street				
	_	Burleson, TX 76028	State		ZIP Code		
		ity					
	<b>✓</b> Ye	es. In which communit	y state or territory did	l you live?	Texas	. Fill in t	he name and current address of that person.
	_	/incent, Nicholas F					
		lame of your spouse, f	, ,	al equivalent			
	_	1217 Camden Yard					
		lumber	Street				
	_	Burleson, TX 76028	State		ZIP Code		
3.	In Colum 2 again a	in 1, list all of your co is a codebtor only if	that person is a gua	rantor or cosig	jner. Make su	re you have listed t	e is filing with you. List the person shown in line the creditor on Schedule D (Official Form 106D), dule E/F, or Schedule G to fill out Column 2.
	Column 1	: Your codebtor				Column 2	: The creditor to whom you owe the debt
						Check all	schedules that apply:
3.1							
	Name					☐ Sched	lule D, line

ZIP Code

Number

City

Street

State

☐ Schedule E/F, line \_\_\_\_\_

☐ Schedule G, line \_\_\_\_

Debtor 1	Nicholas	Robert	Vincent	Case number (if known) 24-42011
Debtor 2	Mary	Ellen	Robinson	
-	First Name	Middle Name	Last Name	

		Additional Page to List More Codebtors	S	
	Column	1: Your codebtor		Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.2				
	Name			☐ Schedule D, line
				☐ Schedule E/F, line
	Numbe	Street		☐ Schedule G, line
	City	State	ZIP Code	

							ı				
Fill	in this information to iden	ntify your case									
D		holas Name		ncent Name							
D	ebtor 2 <b>Ma</b> i			obinson							
(S	'nouse if filing'	Name		t Name				_	Check if this is:		
U	nited States Bankruptcy C	Court for the:	Norther	n District of Te	exas	<b>S</b>		_	☑An amended filing ☑A supplement sho	•	tnetition
_	ase number	24-42011	<u> </u>						chapter 13 incom		
(11	Kilowily								MM / DD / YYYY		
∩f	ficial Form 106	SI									
	chedule I: Yo	_	nme								40/45
	as complete and accurate			en							12/15
Pa	rt 1: Describe Emplo	oyment	e number (ii known). Ai	iswel every que		11.					
1.	Fill in your employment information.	t		Debtor 1					Debtor 2 or no	n-filing sp	oouse
	If you have more than or		nployment status	<b>☑</b> Employed		lot Employed			□ Employed <b>☑</b> No	ot Employe	ed
	attach a separate page v information about additional employers.		ccupation	MHA					Unemployed		
	Include part time, season	nal, or Er	nployer's name	Lockheed Martin							
	self-employed work.  Occupation may include		nployer's address	Po Box 33003 Number Street				Number Street			
	or homemaker, if it applie										
				Lakeland, F	L 3:	3807-3003					
		u,	our lang ampleyed there	City			Zip Code		City	State	Zip Code
		п	ow long employed there	r 13 years							
Pa	ort 2: Give Details Ab	oout Monthl	y Income								
	Estimate monthly incon		ate you file this form. If y	ou have nothing	g to	report for any	line, write S	\$0 in 1	the space. Include y	your non-f	iling spouse
	unless you are separated If you or your non-filing s		nore than one employer.	combine the infe	orma	ation for all em	plovers for	r that	person on the lines	below. If	vou need
	more space, attach a se	•					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,
						For D	ebtor 1		or Debtor 2 or on-filing spouse		
2.	List monthly gross wag deductions.) If not paid n		,		2.	\$7,5	574.86 <u></u>	_	\$0.00		
3.	Estimate and list month	nly overtime pa	ау.		3.	+	\$0.00	+_	\$0.00		

4. Calculate gross income. Add line 2 + line 3.

\$7,574.86

\$0.00

Debtor 1 Debtor 2		Nicholas Mary	Robert Ellen	Vincent Robinson		Cas	e numbei	· (if known) <b>24-4</b> 2	201	1
		First Name	Middle Name	Last Name		<u> </u>				
						For Debtor 1	For Debtor 2 or non-filing spouse			
	Copy line 4	1 here		→	4.	\$7,574.86		\$0.00		
5.	List all pay	roll deductions:			_					
	5a. <b>Tax, M</b>	edicare, and Socia	al Security deductions		5a	\$822.19		\$0.00		
	5b. <b>Manda</b>	tory contributions	for retirement plans		5b	\$0.00		\$0.00		
	5c. Volunta	ary contributions	for retirement plans		5c	\$0.00		\$0.00		
	5d. Require	ed repayments of	retirement fund loans		5d	\$0.00		\$0.00		
	5e. Insurar	nce			5e	\$1,058.63		\$0.00		
	5f. Domes	tic support obliga	itions		5f	\$0.00		\$0.00		
	5g. <b>Union</b> 6	dues			5g	\$94.79		\$0.00		
	5h. Other o	deductions. Specif	fy:		5h. +	\$0.00	+	\$0.00		
6.	Add the pa	yroll deductions.	Add lines 5a + 5b + 5c + 5	5d + 5e +5f + 5g + 5h.	6.	\$1,975.61		\$0.00		
7.	Calculate t	otal monthly take	-home pay. Subtract lin	ne 6 from line 4.	7.	\$5,599.25		\$0.00		
8.		er income regular			-					
		ome from rental p sion, or farm	property and from oper	rating a business,						
	receipts		ch property and busine cessary business exper	0.0	8a.	\$0.00		\$0.00		
	•	t and dividends			8b	\$0.00		\$0.00		
	8c. Family		s that you, a non-filing	spouse, or a	ob. <u>-</u>	<del></del>		<del></del>		
	Include	• •	support, child support,	maintenance, divorce	8c	\$0.00		\$0.00		
	8d. Unemp	loyment compens	sation		8d.	\$0.00		\$0.00		
	8e. Social	Security			8e.	\$0.00		\$0.00		
	8f. Other o	government assis	tance that you regularl	y receive	_					
	assista	nce that you receiv	and the value (if known) ve, such as food stamp ssistance Program) or l	s (benefits under the						
	Specify	r:			8f	\$0.00		\$0.00		
	8g. <b>Pensio</b>	n or retirement in	come		8g	\$0.00		\$0.00		
	8h. Other r	monthly income. S	Specify:		8h. +	\$0.00	+	\$0.00		
9.			nes 8a + 8b + 8c + 8d +	- 8e + 8f +8g + 8h.	9.	\$0.00		\$0.00	   , ,	
10.		•	Add line 7 + line 9. Debtor 1 and Debtor 2	or non-filing spouse	10.	\$5,599.25	+	\$0.00	_	\$5,599.25

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner,	, members of your household	, your dependents	your roommates,	and other
friends or relatives.				

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

	Specify:	
2.	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly inco	me. Write that

Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write the amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

11. 🛨	\$0.00
12.	\$5,599.25

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this for
---

<b>√</b> No		
Y INO.		
Ves Evolain		

Fil	I in this information	to identify your cas	se:			
D	ebtor 1	Nicholas	Robert Vincen	t		
		First Name	Middle Name Last Name	•	Check if this is:  An amended filin	•
	ebtor 2	Mary	Ellen Robins	on		9 owing postpetition chapter 13
(5	Spouse, if filing)	First Name	Middle Name Last Name	•		he following date:
U	Inited States Bankru	ptcy Court for the	Northern Dis	trict of Texas		
_	ase number	24-420	11		MM / DD / YYYY	
(ii	f known)					
Of	ficial Form	106J				
	chedule J		penses			12/15
				g together, both are equally	responsible for supply	ing correct information. If more
						(if known). Answer every question.
Pa	nrt 1: Describe	Your Household	i			
1.	Is this a joint case	?				
	☐ No. Go to line 2	2.				
	_	tor 2 live in a sepa	arate household?			
	<b>✓</b> No					
	☐ Yes. I	Debtor 2 must file	Official Form 106J-2, Expenses	for Separate Household of D	ebtor 2.	
2.	Do you have depe	endents?	□ <sub>No</sub>			
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this information for each dependent		ip to Dependen age	t's Does dependent live with you?
	Do not state the denames.	ependents'	·	Child	10	□ <sub>No.</sub> ☑ <sub>Yes.</sub>
				Child	5	□ <sub>No.</sub> ☑ <sub>Yes.</sub>
				Child	4	□ <sub>No.</sub> ☑ <sub>Yes.</sub>
						No. Yes.
						No. ☐ Yes.
3.	Do your expenses	s include	√No			
	expenses of peop yourself and your		Yes			
	,					
Pa	art 2: Estimate	Your Ongoing N	Monthly Expenses			
Es	stimate your expens	ses as of your ban	kruptcy filing date unless you a	re using this form as a supp	olement in a Chapter 13	case to report expenses as of a
da	te after the bankrup	otcy is filed. If this	is a supplemental Schedule J,	check the box at the top of t	he form and fill in the a	pplicable date.
			sh government assistance if you not schedule I: Your Income (Off			Your expenses
4.	The rental or hom for the ground or le		enses for your residence. Includ	e first mortgage payments ar	nd any rent 4.	\$2,100.00
	If not included in	line 4:				
	4a. Real estate ta	axes			4a. <u> </u>	\$0.00
	4b. Property, hon	neowner's, or rente	er's insurance		4b.	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

4c.

4d.

Debtor 1 Debtor 2 Nicholas Mary Robert Ellen Vincent Robinson

Case number (if known) 24-42011

First Name Middle Name Last Name Your expenses \$0.00 Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** \$170.00 6a. Electricity, heat, natural gas 6a. \$60.00 6b. Water, sewer, garbage collection 6b. \$280.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: \$0.00 6d. Food and housekeeping supplies \$1,200.00 7. 7. \$0.00 Childcare and children's education costs \$250.00 Clothing, laundry, and dry cleaning 9. \$150.00 Personal care products and services 10. \$50.00 Medical and dental expenses 11. **Transportation.** Include gas, maintenance, bus or train fare. \$250.00 12. Do not include car payments. \$100.00 13. 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$330.00 15c. Vehicle insurance 15c. 15d. Other insurance. Specify: \$0.00 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 2016 Ford Fusion \$300.00 17a. 17b. Car payments for Vehicle 2 2022 Indian Carbon R 17b. \$271.00 17c. Other. Specify: \_\_ \$0.00 17c. 17d. Other. Specify: \$0.00 17d. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 18. from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. \$0.00 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes 20b. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance \$0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20e. Homeowner's association or condominium dues 20e.

Debtor 1 Debtor 2		Nicholas Robert Vincent Mary Ellen Robinson		Case number (if known)	Case number (if known) 24-42011		
		First Name	Middle Name	Last Name	_		
21.	Other. Spe	cify:			21. +	\$0.00	
22.	Calculate y	your monthly expe	enses.				
	22a. Add li	nes 4 through 21.			22a	\$5,511.00	
	22b. Copy	line 22 (monthly e	xpenses for Debtor 2),	f any, from Official Form 106J-2	22b	\$0.00	
	22c. Add lii	ne 22a and 22b. T	he result is your month	y expenses.	22c	\$5,511.00	
23.	Calculate y	your monthly net i	ncome.				
	23а. Сору	line 12 (your comb	pined monthly income)	rom Schedule I.	23a	\$5,599.25	
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b	\$5,511.00	
	23c. Subtra	act your monthly e	xpenses from your mor	thly income.			
	The r	esult is your montl	nly net income.		23c	\$88.25	
24.	Do you ex	pect an increase c	or decrease in your exp	enses within the year after you file	e this form?		
				car loan within the year or do you e of a modification to the terms of yo			
	✓ No. ☐ Yes.	None					

Fill in this information	to identify your case:			
Debtor 1	Nicholas	Robert	Vincent	
	First Name	Middle Name	Last Name	
Debtor 2	_Mary	Ellen	Robinson	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	No	orthern District of Texas	
Case number (if known)	24-42011			

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

lacksquare Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	<b>*</b> 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$41,832.70
1c. Copy line 63, Total of all property on Schedule A/B	\$41,832.70
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)     2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$51,015.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$2,025.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$133,434.93
Your total liabilities	\$186,474.93
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	<u>\$5,599.25</u>
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$5,511.00

Debtor	1
Debtor	2

Nicholas Mary Robert Ellen Vincent Robinson

Case number (if known) 24-42011

First Name

Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the Younger Yes	e court with your other sched	dules.
<ul> <li>7. What kind of debt do you have?</li> <li>✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U</li> <li>✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the formation to the court with your other schedules.</li> </ul>	J.S.C. § 159.	t
<ol> <li>From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.</li> </ol>	Official	\$6,380.61
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:		ı
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$59,974.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00	1
9g. <b>Total</b> . Add lines 9a through 9f.	\$59,974.00	

Fill in this information	n to identify your case:			
Debtor 1	Nicholas	Robert	Vincent	
	First Name	Middle Name	Last Name	_
Debtor 2	Mary	Ellen	Robinson	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	N	orthern District of To	exas
Case number (if known)	24-42011			

### Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

an

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read	the summary and schedules filed with this declaration and that they are true and correct.
X /s/ Nicholas Robert Vincent	X /s/ Mary Ellen Robinson
Nicholas Robert Vincent, Debtor 1	Mary Ellen Robinson, Debtor 2
Date 10/04/2024	Date 10/04/2024
MM/ DD/ YYYY	MM/ DD/ YYYY